UTILITY PATENT APPLICATION

TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Under the Paperwork Reduction Act of 1995, no persons are requ	U.S. Patent and uired to respond to a collection of	of information unless it displays a valid OMB control number
Orider the Capernonia Account to the Caperno	Attorney Docket No.	RPI-015DV

Carl H. June First Inventor METHODS FOR MODULATING T CELL PTO RESPONSES BY MANIPULATING Title INTRACELLULAR SIGNAL TRANSDUCTION

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6. Г	X Application	on Data Si	heet. See 37	CFR 1.76			Ь	'						
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Cou	ntry	US	··		Telephone			27-74	00	F	ax	(617) 742-4214		
┶	lame (Print/	Type)	DeAnn F	. Smith			Reg	istration N	lo. (Attorr	ey/Agent)	36,683		
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I hereby certify that this correspondence is being deposited with the U.S. Postal Service as Express Mail, Airbill No. EV 309 881 107 US, in an envelope addressed to: MS Patent Application Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date shown below.

Dated: October 8, 2003

Signature:

(DeAnn F. Smith)

THE TRANSMITTAL		Complete if Known							
FEE TRANSMITTAL	Ī	Application Number Not You					Yet Assigned		
	ľ	Filing	Date		C	Concurrently Herewith			
for FY 2004	Ì	First N	amed	Invent	tor C	Carl H. June			
Effective 10/01/2003, Patent fees are subject to annual revision.		Examiner Name A. Wehbe							
Applicant claims small entity status. See 37 CFR 1.27	- 1	Art Unit 1632							
		Art Unit 1632 Attorney Docket No. RPI-015DV					/		
TOTAL AMOUNT OF PAYMENT (\$) 1,478.00		Attorne	y Doc						
METHOD OF PAYMENT (check all that apply)				FEE	CALCULA	TION (cont	inued)		
Check Credit Money Order Other None	3. A	DDITIC	NAL	FEES					
X Deposit Account:	Large	e Entity	Small	Entity					
Deposit Account 12-0080 Number	Fee Code	Fee	Fee Code	Fee (\$)		Fee Descri	ption	Fee Paid	
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Account Name Lahive & Cockfield, LLP	1052	50	2052	25	Surcharge - I sheet.	charge – late provisional filing fee or cover et.			
The Director is authorized to: (check all that apply) X Charge fee(s) indicated below X Credit any overpayments	1053	130	1053	130	Non-English	specification			
Charge any additional fee(s) during the pendency of this	1812	2,520	1812	2,520	For filing a req	uest for ex pa	rte reexamination		
application	1804	920*	1804	920*	Requesting p	ion			
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.	1805	1,840*	1805	1,840*	Requesting p	ublication of	SIR after		
FEE CALCULATION	1251	110	2251	55	Extension for	reply within	first month		
1. BASIC FILING FEE	1252	420	2252	210			second month		
Large Entity Small Entity	1253	950	2253	475	Extension for	reply within	third month		
Fee Fee Fee Fee Fee Fee Description Fee Paid Code (\$) Code (\$)	1254	1,480	2254	740	Extension for	reply within	fourth month		
1001 770 2001 385 Utility filing fee 770.00	1255	2,010	2255	1,005	Extension for	reply within	fifth month		
1002 340 2002 170 Design filing fee	1401	330	2401	165	Notice of App				
1003 530 2003 265 Plant filing fee	1402		2402	165	Filing a brief		an appeal		
1004 770 2004 385 Reissue filing fee	1403		2403	145	Request for o		ic use proceeding	$\vdash \neg \vdash$	
1005 160 2005 80 Provisional filing fee	1451 1452		1451 2452	1,510 55	Petition to me			-	
SUBTOTAL (1) (\$) 770.00	1452		2453	665		n to revive - unintentional			
AND BEISSIE	1501	•	2501	665		ssue fee (or reissue)			
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE Extra Fee from	1502	Ī	2502	240	Design issue	•			
Claims below Fee Paid Total Claims 45 -20** = 25 x 18.00 = 450.00	1503		2503	320	Plant issue fe				
Independent Common Total Common Commo	1460		1460	130	Petitions to t		ioner		
Claims	1807	7 50	1807	50	Processing f	ee under 37	CFR 1.17(q)		
Multiple Dependent =	1806	3 180	1806	180	Submission	of Information	n Disclosure Stmt	-	
Large Entity Small Entity	802		8021	40	Recording ea	ach patent as	ssignment per		
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1202 18 2202 9 Claims in excess of 20 1201 86 2201 43 Independent claims in excess of 3	1809	9 770	2809	385	(37 ČFR 1.1	29(a))			
1201 86 2201 43 Independent claims in excess of 3 1203 290 2203 145 Multiple dependent claim, if not paid	1810	770	2810	385		ditional inver 7CFR 1.129			
1204 86 2204 43 ** Reissue independent claims	180	1 770	2801	385	Request for	Continued E	xamination (RCE)		
over original patent	180	2 900	1802	900		expedited ex	amination		
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent	Othe	Other fee (specify)							
SUBTOTAL (2) (\$) 708.00		duced by		Filing Fe	e Paid	SUBTO	TAL (3) (\$)	0.00	
**or number previously paid, if greater, For Reissues, see above									
SUBMITTED BY						(Complete	(if applicable))		
Name (Print/Type) DeAnn F. Smith		stration N		6,683		Telephone	(617) 994-080	5	
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Signature \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \									

I hereby certify that this correspondence is US, in an envelope addressed to: MS Pat	s being deposited w tent Application, Co	ith the U.S. Postal mmissioner for Pa	Service as Expre tents, P.O. Box 14	ss Mail, Airbill No. EV 309 881 107 450, Alexandria, VA 22313-1450, or
the date shown below.	(4	1 1	\bigcirc	(DeAnn F. Smith)
Dated: October 8, 2003	Signature:	lu y	·	(DeAnn F. Smith)